



**SUNTERRA Transportation and Logistics
Services, LLC. Account Profile Form**

Please complete fully and email back to: credit@thesunterragroup.com

Date: _____ Credit Request Amount: \$ _____

Must have complete company name and address for credit report.

Company Name: _____

Actual Address: _____

Phone w/ area code: _____ MC# if applicable: _____ DOT# if applicable: _____

IMPORTANT NOTE: Please supply proper billing address, if different from above:

Billing Address: _____

Three current trade credit references:

Company	
Address	
Phone	
Contact	

Company	
Address	
Phone	
Contact	

Company	
Address	
Phone	
Contact	

In applying for credit, we understand and will comply with Sunterra Transportation and Logistics' terms of payment for invoices within fifteen (15) days of receipt of invoice or thirty (30) days from date of invoice.

DUNS# _____ Date: _____ Signature : _____

Bank: _____ Branch: _____ Account # _____

Phone: _____ Contact: _____ Title: _____

Company Officers & Title

1) _____ **Title:** _____

2) _____ **Title:** _____

If applying for credit more than \$150,000 please supply financial statement.

Website or internet address is applicable:

Below is for internal use only:

Analyst	
Credit Limit	
Account #	